PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 7/24/03

10625902

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS			21					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	BLE CLAIMS	2/ minus 20=		• /			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			3 mir	nus 3 =	* Ø.			X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM P			RESENT	•				+145=			+290=	
* If the difference in column 1 is less the				nan zero, enter "0" in column 2						OR	TOTAL	788
CLAIMS AS AMENDED - PART II								TOTAL		OR	OTHER	
	0.	(Column 1)		(Colu				SMALLE	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	* .	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+145=		OR	+290=	
								TOTAL	——————————————————————————————————————	OR	TOTAL	
ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE												
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***]=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR		
	·							TOTAL ADDIT FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=			X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	<u> </u>	
								+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nun	her Previously Pa	id For" (Total o	r Indenend	dentl is th	e bighest gumb	er fo	und in the app	propriate bo	x in co	olumn 1.	